## Little Traverse Bay Bands of Odawa Indians Michelle Chingwa Education Assistance Appeal Form

Last Name	First Name	M.I.	Tribal ID #	
Current Street Address	Current City	Current	t State	Current Zip Code
Bipskaabiimi Depa must be submitted	Michelle Chingwa Education Author (GBD) regarding your within 15 days of receiving rall decisions by the Education	G.P.A. eligibility statunotification by filing the	hay appeal decisions ma us and/or scholarship a his appeal form with th	djustments. Appeal
	attached to all documentation s Appeals Board c/o Tribal Cha			
wish to present you cannot access email	peals Board will schedule a hear appeal case in person you will or wish to be contacted by phone attending my appeal hearing	Il be notified via email ne, please notify the Trib	of the date and time of	f the hearing.** If you (31) 242-1401
and will be returned	You must check one of the about to you to complete. Also, if you're hearing may be held the	you check the box to wa		· -
Circle the decision	you are appealing: G.P.A	A. STATUS SCHO	OLARSHIP ADJUSTN	MENT
With your signature Education Assistan	e below, you affirm the following e Appeal.	ng steps have been fulfi	illed to complete your M	Aichelle Chingwa
<b>▶</b> 1.)	I have attached a detailed exploration that I would like		am appealing and include	ed any supporting
<b>▶</b> 2.)	I have provided an email addre Appeals Board. **If an email a and not reviewed		-	
<b>▶</b> 3.)	I understand that the GBD is c my MCEA file for purposes of my file, I must contact the GB	f an informed decision. If	I do not want specific info	formation shared from
	ormation on this form, and I decete to the best of my knowledge		locumentation I have in	cluded is true,

Signature of Student Date